

Feb-02-2005 06:15pm From:CNH AMERICA LAW DEPT

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**FAX**



CNH America LLC  
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<b>To:</b>	Examiner Meredith C. Petravick	<b>From:</b>	Brant T. Maurer, Esq.
<b>Co:</b>	United States Patent and Trademark Office	<b>Date:</b>	February 2, 2005
<b>Fax #:</b>	703-872-9306	<b>#Pages:</b>	17 (including cover page)
<b>Re:</b>	Response to October 5, 2004 Office Action U.S. Patent Application No. 10/799,544	<b>Atty. Docket No.</b>	16947
<input checked="" type="checkbox"/> <b>Urgent</b> <input type="checkbox"/> <b>For Review</b> <input type="checkbox"/> <b>Please Comment</b> <input type="checkbox"/> <b>Please Reply</b> <input type="checkbox"/> <b>Please Recycle</b>			

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- ☐ Transmittal
- ☐ Fee Transmittal
- ☐ Petition for Extension of Time
- ☐ Amendment

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PTO/SB/21 (04-04)

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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	10/799,544
	Filing Date	March 11, 2004
	First Named Inventor	Kevin S. Richman
	Art Unit	3671
	Examiner Name	Meredith C. Petravick
Total Number of Pages in This Submission	Attorney Docket Number	16947

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> Alter Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):  
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	CNH America LLC Brant T. Maurer
Signature	<i>Brant T. Maurer</i>
Date	February 2, 2005

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the			
Typed or printed name	Brant T. Maurer	Date	February 2, 2005
Signature	<i>Brant T. Maurer</i>		

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Doc Code:

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <b>FEE TRANSMITTAL</b> <b>for FY 2005</b>		<b>Complete If Known</b>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/799,544
		Filing Date	March 11, 2004
		First Named Inventor	Kevin S. Riechman
		Examiner Name	Meredith C. Petravick
		Art Unit	3671
TOTAL AMOUNT OF PAYMENT (\$) \$120.00		Attorney Docket No.	16947

## METHOD OF PAYMENT (check all that apply)

☐ Check    ☐ Credit Card    ☐ Money Order    ☐ None    ☐ Other (please identify): \_\_\_\_\_  
☒ Deposit    Deposit Account Number: 03-1025    Deposit Account Name: CNH America LLC

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## FEE CALCULATION

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid(\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

## 2. EXCESS CLAIM FEES

## Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Fee (\$)	Small Entity Fee (\$)
50	25
200	100
360	180
Multiple Dependent Claims	
Fee (\$)	Fee Paid (\$)

Total Claims    Extra Claims    Fee (\$)

- 20 or HP =    x    \$50.00 =    \$0.00

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims    Extra Claims    Fee (\$)

- 3 or HP =    x    \$200.00 =    \$0.00

HP = highest number of independent claims paid for, if greater than 3.

## 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listing under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof.

See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(e).

Total Sheets    Extra Sheets    Number of each additional 50 or fraction thereof    Fee (\$)

- 100 =    / 50    (round up to a whole)    x    \$250.00 =    \$0.00

## 4. OTHER FEE(S)

Non-English specification, \$130 fee (no small entity discount)

Other (e.g. late filing surcharge): Petition for One-Month Extension of Time

\$120.00

## SUBMITTED BY

Signature	<i>Brant T. Maurer</i>	Registration No. (Attorney/Agent)	53,285	Telephone	262-636-5368
Name (Print/Type)	Brant T. Maurer			Date	February 2, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Date of Signature and Deposit: February 2, 2005

*Blant T. Maurer*  
Blant T. Maurer,  
Attorney of Record

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Kevin S. Richman et al.  
Serial No.: 10/799,544  
Filed: March 11, 2004  
Examiner: Meredith C. Petravick  
Group Art Unit: 3671  
Docket No.: 16947  
Title: *Basket Door Extension for a Cotton Harvester*

AMENDMENT

Commissioner for Patents  
PO Box 1450  
Alexandria, VA, 22313-1450

Dear Sir:

In response to the Office Action mailed October 5, 2004, please amend the above-identified Application as follows: